

Kidz Luv Sports Inc.

James Reigner Scholarship Application

Athlete/Student Name: _____ Age: _____ M/F: _____

Address: _____

School: _____ Grade: _____

GPA: _____ Class Rank: _____ SAT/ACT score: _____

Sports / Activities: _____

Level/Team _____

Parent/Guardian: _____ Contact cell Phone: _____

Parent/Guardian: _____ Contact Cell Phone: _____

E-mail Address: _____

Athlete lives with: () Both Parents () Mother () Father () Step Parent

() Other _____

Number of family members residing at above address: _____

Please report total monthly family income, including wages, salaries, tips, unemployment and worker's compensation, net income from self-owned business/farm, welfare, child support, alimony, income from estates/trusts/investments, pensions, Social Security and any other income including regular contributions from persons not living in household on line below:
\$_____.

Does your child qualify for free or reduced school lunch? Yes No

Has your family experienced sudden family hardship? Yes No

If yes, please explain briefly:

I, _____, have completed this application on behalf of _____ I understand that this application form does not guarantee an opening or acceptance of a scholarship award. I certify that all of the information I have supplied is true and correct. I permit Kidz Luv Sports Inc. to verify the information on this application as needed. I understand that the Board Members do have to abide by the laws of the 501(c)3, not-for-profit status. Confidentiality will be maintained at all times by the Board Members. I understand that such participation may include my child being photographed for publicity purposes.

Legal Parent/Guardian

Date

All applications will be reviewed on a first come, first serve basis at the end of the year. Applicants can only request one scholarship once every two years. The KLS Board meets on the second Sunday of the month. Applicants will be notified of the board's decision by email. Scholarship payments will be made directly to the Third party organization on behalf of the scholarship recipient. Applicants will be responsible for any and all remaining balances that are due to the third party organization and must pay their portion. Failure to comply with this contract will prevent the athlete from ever qualifying for any future scholarships.

If your athlete/student is applying for a scholarship, it is highly recommended that the family member have been participating in the fundraising activities that have been going on at Kidz Luv Sports Inc. Participation is key to keeping the program alive and continuing to bring in new community sponsors. Giving back to our community is not only part of our philosophy, but how we show our thanks to our sponsors for their financial generosity. If your athlete/student does receive a scholarship, it is expected that the member continues to participate in fundraising activities. Applicants must be a member in Good standing, have met the requirements of KLS, paid the annual dues and have a membership form on file annually.

Coaches Evaluation:

Coach Name: _____

Athlete Name: _____

Does the Athlete arrive to practice on time? Yes No

Does the Athlete arrive at the competition on time? Yes No

Does the Athlete have a positive attitude? Yes No

Is the Athlete a positive influence? Yes No

Is the Athlete helpful to other athletes during practice? Yes No

Is the Athlete cooperative during practice? Yes No

Would you recommend this Athlete for a scholarship? Yes No

Please attach a Letter of Recommendation.

Teachers Evaluation:

Teacher Name: _____

Student Name: _____

Does the Student have a good attendance record? Yes No

Does the Student arrive to class on time? Yes No

Does Student have a positive attitude? Yes No

Is the Student a positive influence? Yes No

Is the Student helpful to other students during class? Yes No

Is the Student cooperative during class? Yes No

Would you recommend this Student for a scholarship? Yes No

Please attach a Letter of Recommendation.